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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
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Application Number	10 / 684, 851
Filing Date	10/15/2003
First Named Inventor	McDonald
Art Unit	3635
Examiner Name	Chapman
Attorney Docket Number	

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☒ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
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The reasons for this request are: Attorney of record seeks withdraw based upon change of law firm and Applicant/Inventor consents and elects to pursue prosecution himself.

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	Richard McDonald				
Address	12821 Huntmaster Lane				
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Telephone			Email		
Signature					
Name	Anthony Tacconi		Registration No.	48,660	
Date	4/13/07		Telephone No.	804.687.9069	

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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